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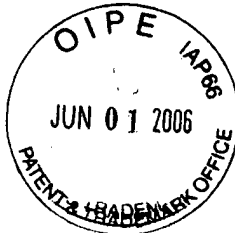
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7590 02/28/2006

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06/02/2006 EHAILE2 00000005 10763609

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THOMAS J. SCHAB (Depositor's name)
 Thomas J. Schab (Signature)
 May 30, 2006 (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/763,609	01/23/2004	Eric Downey	ED-2004	7268

TITLE OF INVENTION: CONVENTIONAL BEDDING MATTRESS WITH ILLUMINATION PROPERTIES

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700	\$300	\$1000	05/30/2006

EXAMINER	ART UNIT	CLASS-SUBCLASS
CONLEY, FREDRICK C	3673	005-716000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).
☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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2. For printing on the patent front page, list
 (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, 1 THOMAS J. SCHAB
 (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. 2 _____
 3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☐ Corporation or other private group entity ☐ Government

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Authorized Signature THOMAS J. SCHAB
 Typed or printed name Thomas J. Schab

Date May 30, 2006
 Registration No. 35,908

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